

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000010437

FILED  
Feb 20, 2009  
Secretary of State

Entity Name: A.B. REHABILITATION CENTER INC.

## Current Principal Place of Business:

1901 W. FLAGLER STREET  
STE 7  
MIAMI, FL 33135

## New Principal Place of Business:

## Current Mailing Address:

1901 W. FLAGLER STREET  
STE 7  
MIAMI, FL 33135

## New Mailing Address:

FEI Number: 65-0983398      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CASTILLO, ZUGEILYS  
15040 SW 10 ST  
MIAMI, FL 33194      US

## Name and Address of New Registered Agent:

CASTILLO, ZUGEILYS  
1901 WEST FLAGLER ST  
SUITE 7  
MIAMI, FL 33135 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ZUGEILYS CASTILLO

02/20/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P      ( ) Delete  
Name: CASTILLO, ZUGEILYS  
Address: 15040 SW 10TH STREET  
City-St-Zip: MIAMI, FL 33194

Title: VP      ( ) Delete  
Name: CASTILLO, YURIANDENYS  
Address: 15040 SW 10TH STREET  
City-St-Zip: MIAMI, FL 33194

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P      (X) Change ( ) Addition  
Name: CASTILLO, ZUGEILYS  
Address: 1901 WEST FLAGLER ST  
City-St-Zip: MIAMI, FL 33135

Title: VP      (X) Change ( ) Addition  
Name: CASTILLO, YURIANDENYS  
Address: 1901 WEST FLAGLER ST  
City-St-Zip: MIAMI, FL 33135

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ZUGEILYS CASTILLO

P

02/20/2009

Electronic Signature of Signing Officer or Director

Date